# **APPLICATION DATA SHEET**

#### **Application Information**

**Secrecy Order in Parent Appl.::** 

**Application Number::** Not Yet Assigned April 2, 2004 Filing Date:: **Application Type::** Regular **Subject Matter::** Utility Suggested Classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: Number of CD Disks:: **Number of Copies of CDs::** Sequence Submission?:: Computer Readable Form (CFR)?:: **Number of Copies of CFR::** Title:: Method And Machine for Producing A Continuous Filter Rod **Attorney Docket Number::** 41653-200975 Request for Early Publication?:: Request for Non-Publication?:: **Suggested Drawing Figure::** Figures 1-12 **Total Drawing Sheets::** 9 **Small Entity?::** Latin Name:: **Variety Denomination Name::** Petition Included?:: **Petition Type::** Licensed US Govt. Agency:: **Contract or Grant Numbers::** 

#### **Applicant Information**

**Applicant Authority Type::** 

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

Given Name::

Peter-Franz

Middle Name::

Family Name::

**ARNOLD** 

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Germany

Street of Mailing Address::

Auf der Bojewiese 49a

City of Mailing Address::

Hamburg

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

21033

Address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

Given Name::

Sönke

Middle Name::

Family Name::

**HORN** 

Name Suffix::

**Country of Residence::** 

Germany

**Street of Mailing Address::** 

llenweg 54

City of Mailing Address::

Geesthacht

Postal or Zip Code of Mailing

21502

Address::

Applicant Authority Type::

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

Given Name::

Uwe

Middle Name::

Family Name::

HEITMANN

Name Suffix::

State or Province of Residence::

Country of Residence::

Germany

**Street of Mailing Address::** 

Schärstraße 3

City of Mailing Address::

Hamburg

State or Province of Mailing

Address::

Country of Mailing Address::

Germany

Postal or Zip Code of Mailing

21031

Address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

Given Name::

Thorsten

Middle Name::

Family Name::

**SCHERBARTH** 

Name Suffix::

State or Province of Residence::

**Street of Mailing Address::** 

Westerkamp 43

**City of Mailing Address::** 

Geesthacht

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

21502

Address::

Applicant Authority Type::

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

**Given Name::** 

Alexander

Middle Name::

Family Name::

**BUHL** 

Name Suffix::

State or Province of Residence::

**Street of Mailing Address::** 

Hausnummer 21

1

City of Mailing Address::

Robertsdorf

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

23974

Address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship::** 

German

Country::

Status::

**Full Capacity** 

Given Name::

Stephan

Middle Name::

Family Name::

WOLFF

Name Suffix::

State or Province of Residence::

Street of Mailing Address::

Eichloh 3

City of Mailing Address::

Glinde

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

21509

Address::

#### **Correspondence Information**

**Correspondence Customer** 

Number::

26694

**Phone Number::** 

(202) 344-4000

Fax Number::

(202) 344-8000

E-Mail Address::

rkinberg@venable.com

# **Representative Information**

**Representative Customer** 

26694

Number::

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		

# **Foreign Priority Information**

Application Number::	Filing Date::	Priority Claimed::
	April 3, 2003	YES
	• •	Number::

# **Assignee Information**

**Assignee Name::** 

HAUNI Maschinenbau AG

**Street of Mailing Address::** 

Kurt-A.-Körber-Chaussee 8-32

City of Mailing Address::

Hamburg

State or Province of Mailing

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

D-21033

Address::

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